

LOOK *up*

*HEALING OUR COMMUNITY
WITH HOPE.*

7th Annual Prescription Drug
and Heroin Symposium

October 13, 2016

Marcia Haaff
Kristina Johnson
The Lutheran Foundation

INSPIRED BY THE
Lutheran
Foundation

Marcia Haaff, CEO The Lutheran Foundation

**The Lutheran Foundation's vision is
to promote spiritual, mental,
and physical well-being
for all people.**

Our footprint consists of ten counties:

**Allen
Adams
DeKalb
Huntington
Lagrange
Noble
Steuben
Wabash
Wells
Whitley**

Why are we focusing on mental and behavioral health and wellness?

Significance of Mental Health

- 50% of all lifetime cases of mental illness begin by age 14, and 75% by age 24
- 50% of students, 14 and older, with mental health problems drop out of high school
- 70% of youth in juvenile justice system have mental health problems
- UNDER SERVED: In any given year only 20% of children and youth with mental health needs are identified and treated.
- 10 YEARS: Average lag time between onset of symptoms and beginning of treatment for mental illness.
- According to national statistics, someone in the US dies from suicide every 12.3 minutes. Making suicide the 2nd leading cause of death in youth ages 15 to 24.

(NAMI, 2015)

Significance of Opioid Use in Indiana

In 2014, 1,152 Hoosiers **died** from drug poisoning (500% increase since 1999)

Newborns exposed to opioids in utero have a 60-80% likelihood of suffering from neonatal abstinence syndrome (NAS)

Drug overdoses overtook the number of motor vehicle deaths in 2008

80% of Indiana employers have observed prescription drug misuse by their employees

Indiana leads the nation in pharmacy robberies

Opioid use disorder in Indiana resulted in:

- \$31.9 million for nonfatal ER visits
- \$64.1 million for hospitalization of babies with NAS
- \$350 million for related hospitalizations

With drug overdose fatalities costing \$1.4 billion (including medical costs and lost lifetime earnings for victims)

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Mental and Behavioral Health Needs Assessment

- Praxis Strategies & Solutions, Inc.
- Data for 10 counties in northeastern Indiana.
- Provides a baseline.
- Insight into every area related to mental and behavioral health.
- Free download of the Assessment and Data Compendium at www.AreYouTheBody.com

Key Findings

- Both adult and youth noted barriers to accessing mental and behavioral health services
- Access is a smaller problem than sustaining care
- Stigma associated with mental illness and addiction
- Lack of knowledge of where to go
- Navigating the system easier for higher income earners.

Assessment Recommendations

- Address issues of access
- Improve resource and referral networks
- Address combating the stigmatization of mental and behavioral health
- Form a regional advocacy body to speak to both policy and larger structural issues in mental and behavioral health
- Make a concerted effort to keep mental and behavioral health issues in the forefront of public, community, and corporate policy development

Assessment Recommendations (continued)

- Seeding a systemic approach to address mental/behavioral health conditions through cognitive behavioral health, in addition to drug therapies
- Supporting schools and their allies to become a reliable referral resource for youth and their families

**Kristina Johnson,
Director of Community Initiatives
The Lutheran Foundation**

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Lookupindiana.org

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FIND HELP

Topics

Students

Events

Blog

About

Contact



HEALING OUR COMMUNITY WITH

HOPE

Mental and behavioral health issues can be a silent struggle. But there's always hope on the horizon. Whether you want to raise awareness, reduce stigma, find help or help others – it's time to Look Up. Then look here for resources, information and providers.

LEARN MORE

GET IMMEDIATE HELP

CONFIDENTIAL & AVAILABLE 24/7



CALL **800-284-8439**
OR TEXT LOOKUP TO 494949

|
OR
|

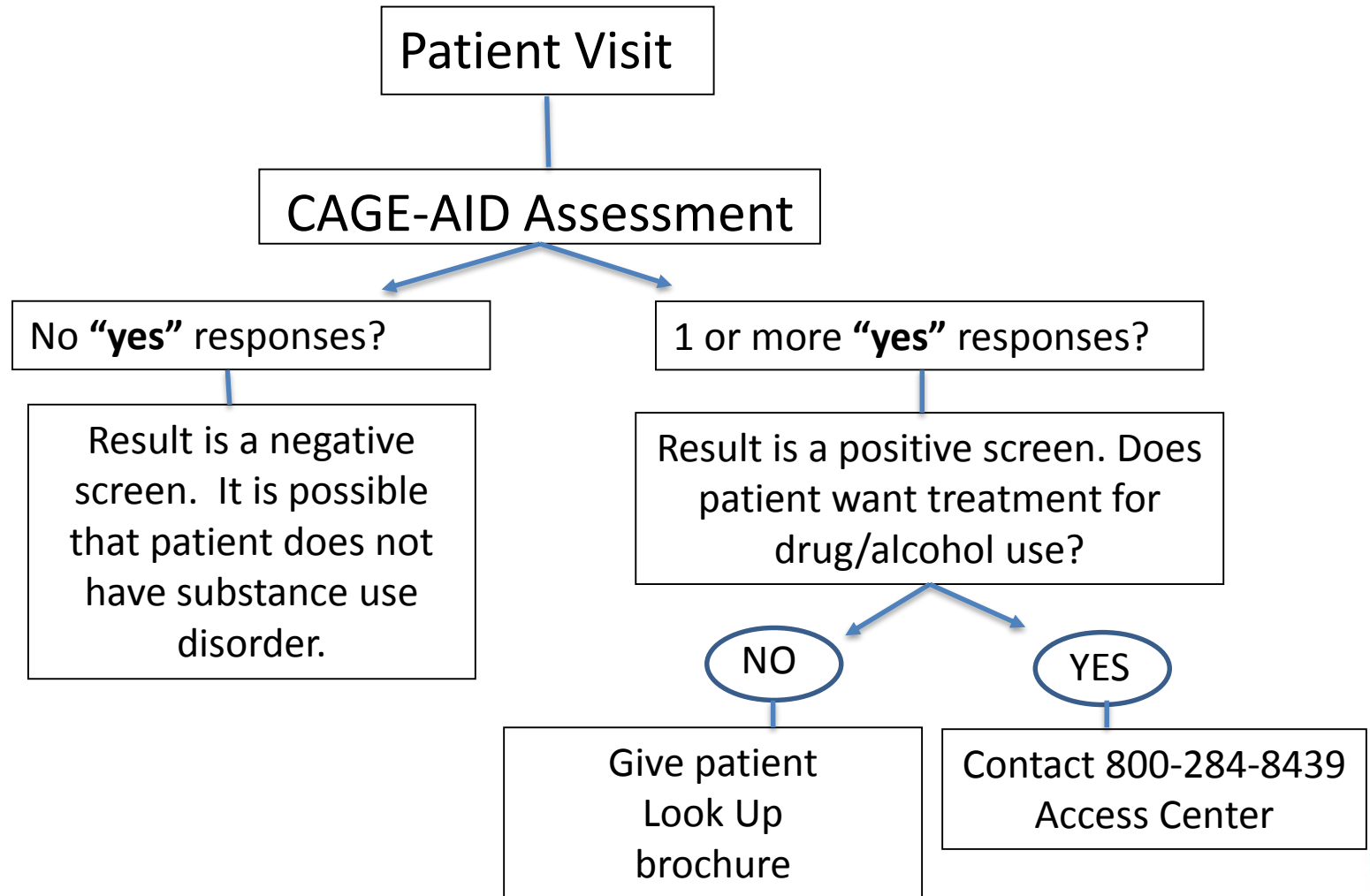


START A CHAT

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Pathway for Substance Use Disorder



CAGE-AID

Purpose: The CAGE-AID (Adapted to Include Drugs) is a version of the CAGE alcohol screening questionnaire, adapted to include drug use. It assesses likelihood and severity of alcohol and drug abuse.

Target Population: Adults and adolescents

Evidence:

- Easy to administer, with good sensitivity and specificity (Leonardson et al. 2005)
- More sensitive than original CAGE questionnaire for substance abuse (Brown & Rounds 1995)
- Less biased in terms of education, income, and sex than the original CAGE questionnaire (Brown & Rounds 1995)

Estimate time: brief, approximately 1 minute to administer and score

Length: 4 questions

Administered by: Patient interview, or self-report

Intended Setting: Primary Care

CAGE-AID

Only 4 questions:

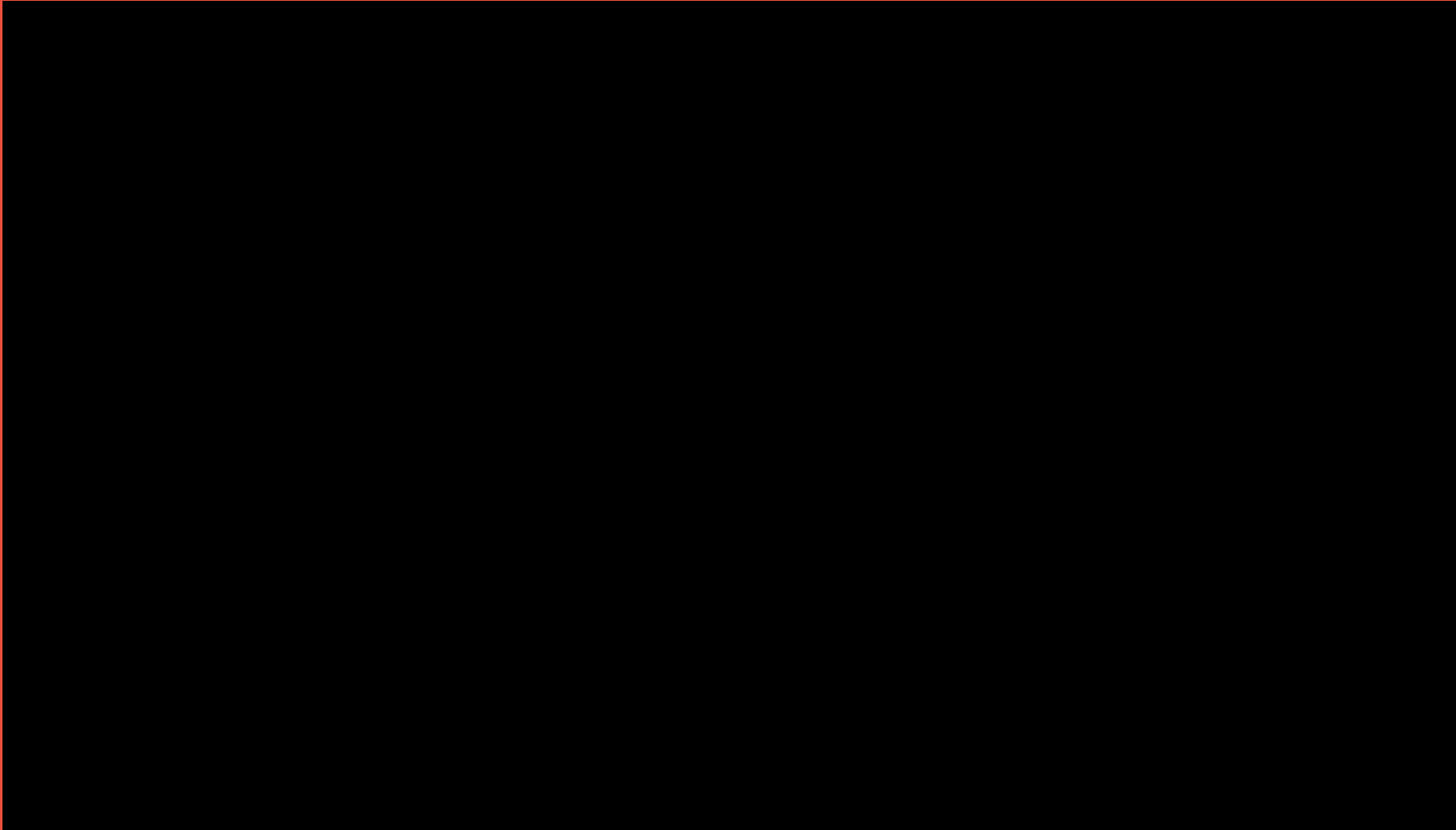
- 1) Have you ever felt that you ought to cut down on your drinking or drug use?
- 2) Have people annoyed you by criticizing your drinking or drug use?
- 3) Have you ever felt bad or guilty about your drinking or drug use?
- 4) Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover?

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Same Value?





Look Beyond the Labels

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Regional Mental Health
Coalition
Northeast Indiana
Launched: March 29, 2016

Objective: Prioritization of mental and behavioral healthcare within our region.



Goals:

- 1) Collaboration of efforts to ensure best mental/behavioral healthcare
- 2) Promotion of collaborative mental/behavioral health messaging
- 3) Promotion of mental/behavioral health conversations and campaigns to reduce stigma
- 4) Prioritizing money for mental health services/resources and to ensure efficiency of resources (reduction of overlap)
- 5) Advocacy for policy and systemic changes

**What is the Coalition's
role in the solution?**

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The 5th Vital Sign

In 2001, the Joint Commission rolled out its Pain Management Standards, which helped grow the idea of pain as a "fifth vital sign." It required healthcare providers to ask every patient about their pain, given the perception at the time that pain was undertreated.

Since that time, the U.S. has experienced a surge in opioid prescriptions -- and, subsequently, an increase in overdoses and deaths tied to these painkillers.



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Changes Involving Prescribing Opioids

- ❖ Changes in the Indiana Medical Licensing Board rules, adding [844 IAC 5-6](#) to establish requirements for the prescribing of opioid controlled substances for pain management. Final Rule went into effect November 2014.
- ❖ Advocates are urging the Joint Commission and Centers for Medicare and Medicaid Services (CMS) to scrap policies that can lead to opioid overprescribing, with special focus on the ‘fifth vital sign’ (which requires healthcare providers to ask every patient about their pain). In a [letter to Joint Commission](#), it states: **“Pain is a symptom, not a vital sign.”**
- ❖ Letter to [Medicaid/Medicare](#), asking for removal of pain-related questions from patient satisfaction survey.

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Changes Involving Prescribing Opioids For Dentists

❖ Changes in opioid prescribing recommendations for dentists. In summary, their recommendation is: “Safe and effective management of acute and post-operative dental pain is necessary to improve patients’ quality of life and can be accomplished by the use of non-opioids according to clinical studies.”

“One Advil and one Tylenol is more effective in ‘treating’ pain than 15 mg of Oxycodone.”

Dr. Michael McNett, MD Medical
Director for Chronic Pain, Aurora Health Care

Assessment Recommendations (continued)

- Seeding a systemic approach to address mental/behavioral health conditions through cognitive behavioral health, in addition to drug therapies
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Ideal Solution for Substance Use Disorder Treatment

The use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders.

National RX Drug Abuse & Heroin Summit



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Our Community Needs to be a Part of the Solution

- 1) Physicians and NPs to help administer the MAT portion of patient treatment, working in collaboration with local mental health providers.
- 2) Medical offices to screen for substance use disorders in their patients. Assessments and pathways for treatment will be on lookupindiana.org.
- 3) Healthcare facilities (hospitals, including ER, and urgent care) to fully understand substance use disorder, and the possibility of relapse that could result in administering an opioid to a patient who is in recovery.
- 4) OB/GYN professionals to screen for substance use disorders with expecting mothers to reduce Neonatal Abstinence Disorder (NAS).
- 5) Medical offices to screen for mental health conditions, and to know that pain can often be a result of a mental health condition (ex: a patient with depression can feel physical pain). Assessments and pathways will be on lookupindiana.org.
- 6) Education on mental health and substance use disorders needs to be expanded to include medical professionals, schools, workplace, and faith-based organizations.
- 7) Focus on treatment solutions within criminal justice system.
- 8) Learn best practices from other communities and states.
- 9) Working collaboratively, and improve communications with local/state System of Care, to avoid the wasted time and efforts that result from the old 'silo' mentality.

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System of Care

The local and regional community takes responsibility for building a comprehensive system that leads to sustainable success for youth and families.

Allen County



Adams County



System of Care and Coalition Communication: Basecamp

Time is valuable, and to help us move forward in between physical meetings, we use Basecamp, an online project management tool.

A Basecamp is a private, secure space online where we can work together to organize and discuss everything we need to get a project done. See it, track it, discuss it, act on it. Tasks, discussions, deadlines, and files - everything's predictably organized in Basecamp.



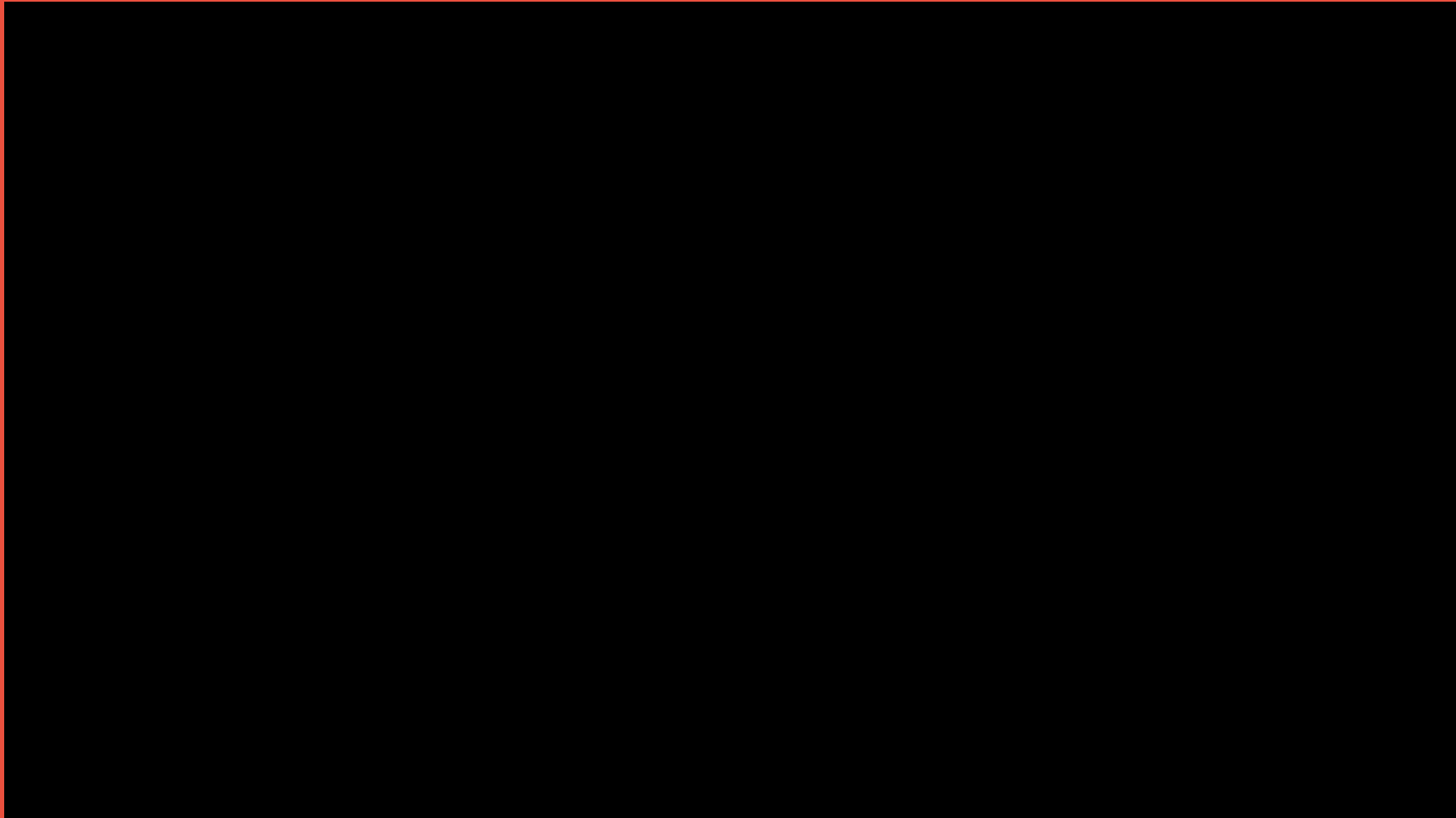
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Get Schooled Tour Overview

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Get Schooled Tour

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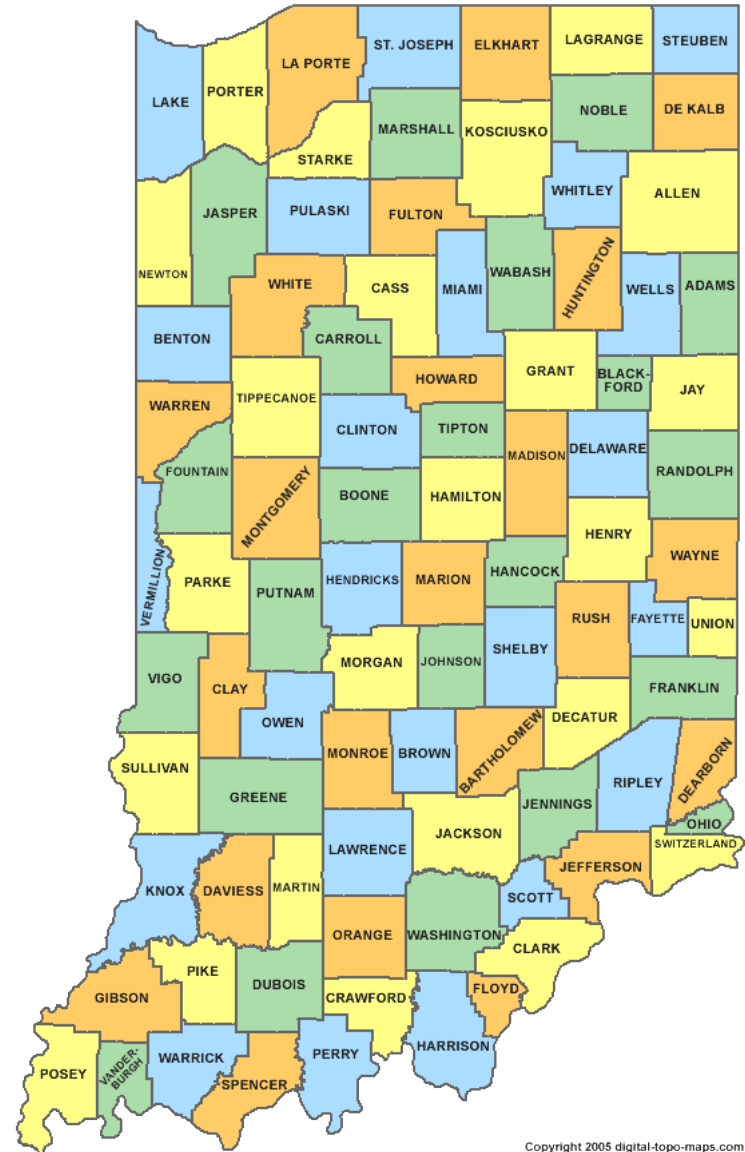


Look Beyond the Label –
Student Version

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What's Next?

Look Up expanded
state-wide



START
THE CONVERSATION.

SILENCE
THE STIGMA.

For more information on Look Up,
the Regional Mental Health
Coalition, or System of Care
contact:

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